APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR Subject Matter:: UTILITY

CD-ROM or CD-R?:: NONE

Title:: METHOD, APPARATUS, AND SYSTEM

FOR USING A SYNCHRONOUS BURST TIME PLAN IN A COMMUNICATION

NETWORK

Attorney Docket Number:: 244917US8

Request for Non-Publication?:: YES
Total Drawing Sheets:: 22

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: · U.S.A.

Status:: FULL CAPACITY

Given Name:: David Middle Name:: D.

Family Name:: BETTINGER
City of Residence:: CHANTILLY
State or Province of Residence:: VIRGINIA

Country of Residence:: U.S.A.

Street of Mailing Address:: 4719 Bengamin Cross Court

City of Mailing Address:: Chantilly State or Province of Mailing Address:: Virginia Country of Mailing Address:: U.S.A.

Postal or Zip Code of Mailing Address:: 20151

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: U.S.A.

Status:: FULL CAPACITY

Given Name:: Joseph Middle Name:: J.

Family Name:: BOONE
City of Residence:: FAIRFAX

State or Province of Residence:: VIRGINIA Country of Residence:: U.S.A.

Street of Mailing Address:: 6121 Saddle Horn Drive

City of Mailing Address:: Fairfax
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 22030

Applicant Authority Type:: INVENTOR Primary Citizenship Country:: CHINA

Status:: FULL CAPACITY

Given Name:: Hao
Family Name:: CHENG
City of Residence:: HERNDON
State or Province of Residence:: VIRGINIA

Country of Residence:: U.S.A.

Street of Mailing Address:: 13602 Flintwood Place

City of Mailing Address:: Herndon
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 20171

Applicant Authority Type:: INVENTOR Primary Citizenship Country:: DENMARK

Status:: FULL CAPACITY

Given Name:: David Middle Name:: B.S.

Family Name:: EDSBERG
City of Residence:: HERNDON
State or Province of Residence:: VIRGINIA

Country of Residence:: U.S.A.

Street of Mailing Address:: 12819 Briary River Terrace

City of Mailing Address:: Herndon
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 20170

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: INDIA

Primary Citizenship Country:: INDIA
Status:: FULL CAPACITY

Given Name:: Venugopal Family Name:: EYYUNNI

City of Residence:: CENTREVILLE

State or Province of Residence:: VIRGINIA Country of Residence:: U.S.A.

Street of Mailing Address:: 6565 Creek Run Drive

City of Mailing Address:: Centreville
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 20121

Applicant Authority Type:: INVENTOR Primary Citizenship Country:: IRELAND

Status:: FULL CAPACITY

Given Name:: Conor
Family Name:: FOLEY
City of Residence:: STERLING
State or Province of Residence:: VIRGINIA

Country of Residence:: U.S.A.

Street of Mailing Address:: 20677 Parkside Circle

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

U.S.A.

Postal or Zip Code of Mailing Address::

20165

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: U.S.A

Status:: FULL CAPACITY
Given Name:: Christopher

Middle Name:: D.

Family Name:: GREGORY
City of Residence:: HERNDON
State or Province of Residence:: VIRGINIA

State or Province of Residence:: VIRGINIA

Country of Residence:: U.S.A.

Street of Mailing Address:: 12611 Builders Road
City of Mailing Address:: Herndon

City of Mailing Address:: Herndon
State or Province of Mailing Address:: Virginia
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 20170

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: U.S.A.

Status:: FULL CAPACITY

Given Name:: Jason Middle Name:: B.

Family Name:: MAIORANA
City of Residence:: VIENNA

State or Province of Residence:: VIRGINIA

Country of Residence:: U.S.A.

Street of Mailing Address:: 9558 Pine Cluster Circle

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

U.S.A.

Postal or Zip Code of Mailing Address:: 22181

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

ASSIGNMENT INFORMATION

Assignee Name:: iDirect Incorporated

Street of Mailing Address:: 10803 Parkridge Boulevard

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

U.S.A.

Postal or Zip Code of Mailing Address::

20191